Ann	lication	or Doc	ket N	umbei
\neg	IICAIICH	ω	WELLIA	unibei

PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

CLAIMS AS FILED - PART I (Column 1) (Column 2)						SMALL ENTITY TYPE		OR	OTHER THAN OR SMALL ENTITY			
TOTAL CLAIMS		268.	68.				RATE	FEE		RATE	FEE	
FOR				NUMB	NUMBER EXTRA		BASIC FEE	375.00	OR	BASIC FEE	750.00	
TOTAL CHARGEABLE CLAIMS			268_minus 20= * 248			X\$ 9=	2282.57	OR	X\$18=			
INDEPENDENT CLAIMS 9.			9. mir	nus 3 =	*6]		X42=	20.00	l í	X84=	
MULTIPLE DEPENDENT CLAIM PRESENT					Ì	+140=	CXXX IVU	OR	+280=			
* If the difference in column 1 is less than zero, enter "0" in column 2				olumn 2	1		28J9 ₁₆		TOTAL			
CLAIMS AS AMENDED - PART II							X/O / 16	0	OTHER	THAN		
		(Column 1)		(Colur		(Column 3)		SMALL	ENTITY	OR	SMALL	NTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDM	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	* NTATION OF M	Minus	***	F.CL AIM	=		X42=		OR	X84=	
Щ	FIRST FRESE	NTATION OF W	OLTIPLE DEF	ENDEN	CLAIN	<u> </u>	' [+140=		OR	+280=	,
							L	TOTAL ADDIT. FEE		OR	TOTAL ADDIT, FEE	
		(Column_1)		(Colur	mn 2)	(Column 3)						
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDN	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***	F OL A 13.4	-		X42=		OR	X84=	
<u> </u>	FIRST PRESE	NTATION OF M	ULTIPLE DEP	ENDEN	CLAIM	L	ا ا	+140=		OR	+280=	
							L	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colu		(Column 3)					7,00m. (EE	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDN	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	* NTATION OF M	Minus	***	T CL AINA	<u> </u>		X42=		OR	X84=	
_	ringi rhese	INTATION OF M	OLITE DEF	ENDEN	CLAIIVI		1	+140=		OR	+280=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. **If the "Highest Number Province! Poid For" IN THIS SPACE is less than 20, settle "0".							<u></u>					
***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												

FISH & RICHARDSON P.C.

Commissioner for Patents July 31, 2003 Page 2

Under 35 USC 119, this application claims the benefit of a foreign priority application filed in Japan, serial number 2002-232895, filed August 9, 2002.

Basic filing fee	\$750
Total claims in excess of 20 times \$18	\$0
Independent claims in excess of 3 times \$84	\$168
Fee for multiple dependent claims	\$0
Total filing fee:	\$918

A check for the filing fee is enclosed. Please apply any other required fees or any credits to deposit account 06-1050, referencing the attorney docket number shown above.

If this application is found to be incomplete, or if a telephone conference would otherwise be helpful, please call the undersigned at (858) 678-5070.

Kindly acknowledge receipt of this application by returning the enclosed postcard.

Please direct all correspondence to the following:

PTO Customer Number

20985

Respectfully submitted,

Scott C. Harris Reg. No. 32,030 Enclosures SCH/lmb